

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.D.	417790	
O.I.P.E. CLASSIFIER	12	4121	
FORMALITY REVIEW	12	6/10/10	
RESPONSE FORMALITY REVIEW			

BEST AVAILABLE COPY

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	6/10/10
2	✓	✓	6/10/10
3	✓	✓	6/10/10
4	✓	✓	6/10/10
5	✓	✓	6/10/10
6	✓	0 0	6/10/10
7	✓	✓	6/10/10
8	✓	✓	6/10/10
9	✓	✓	6/10/10
10	✓	✓	6/10/10
11	✓	✓	6/10/10
12	✓	✓	6/10/10
13	✓	✓	6/10/10
14	✓	✓	6/10/10
15	✓	✓	6/10/10
16	✓	✓	6/10/10
17	✓	0 0	6/10/10
18	✓	0 0	6/10/10
19	✓	✓	6/10/10
20	✓	✓	6/10/10
21	✓	✓	6/10/10
22	✓	✓	6/10/10
23	✓	✓	6/10/10
24	✓	✓	6/10/10
25	✓	✓	6/10/10
26	✓	✓	6/10/10
27	✓	✓	6/10/10
28	✓	0 0	6/10/10
29	✓	0 0	6/10/10
30	✓	✓	6/10/10
31	✓	✓	6/10/10
32	✓	✓	6/10/10
33	✓	✓	6/10/10
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If more than 150 claims or 10 actions
staple additional sheet here